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Congress of the United States House of Representatives COMMITTEE ON WAYS AND MEANS

WASHINGTON, DC 20515

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June 5, 2014

JooYeun Chang Associate Commissioner of the Children's Bureau Administration for Children and Families Department of Health and Human Services 1250 Maryland Ave., SW, Washington, DC 20024

Dear Associate Commissioner Chang:

Thank you for testifying at our May 29, 2014 hearing and for sharing your expertise related to the use of psychotropic medications among children in foster care. Because of time limitations, there was one point you made during the hearing that we were unable to fully explore. I would like to ask you to provide the Subcommittee with additional information on this issue, and I have included my question below that I hope you will answer in writing by June 19, 2014. As I mentioned at the end of the hearing, we will include your answers in the official hearing record.

Thank you again for your participation in our hearing, and I look forward to receiving your response.

Sincerely,

Dave Reichert Chairman Seicht

Questions for the Record Hearing on "Caring for Our Kids: Are We Overmedicating Children in Foster Care?"

On May 29, 2014, the Ways and Means Human Resources Subcommittee held a hearing titled "Caring for Our Kids: Are We Overmedicating Children in Foster Care?" Testimony submitted by Associate Commissioner JooYeun Chang noted that the Child and Family Services Improvement and Innovation Act of 2011 "requires states to report to HHS protocols they have in place for monitoring the use of psychotropic medications."

First, have all states developed protocols to monitor the use of psychotropic medications for children in foster care, and reported those protocols to HHS as required in the law?

Second, can you provide us with the protocols each state has submitted regarding how they plan to monitor the use of these drugs?

Third, can you characterize the various approaches states have taken to address this issue? For example, some states like Illinois review all prescriptions for psychotropic medications before they are given to youth in foster care. Do we know how many states follow this practice? Other states review their Medicaid payment data to find questionable prescription practices. Do we know how many states review their Medicaid data in this way? What other practices, if any, are common among states?

Finally, what data is available from states on how the implementation of these protocols has affected (1) the number of foster youth who are prescribed any psychotropic medication, (2) the number who are prescribed multiple medications, and (3) other key data about psychotropic medication use by youth in foster care?